# DEPARTMENT OF HEALTH AND FAMILY SERVICES Division of Disability and Elder Services Printed 07/28/2006

# **Provider Inspection Summary**

For the period 06/01/2003 to 05/31/2006 Community Based Residential Facility CLASS CNA (NONAMBULATORY) STATE OF WISCONSIN
Bureau of Quality Assurance
P.O. Box 2969
Madison WI 53701-2969

## **Facility Information**

Facility Name: CLARITY CARE GREENFIELD HOUSE (410332)

Address: 643 GREENFIELD ST, NEENAH, WI 54956

**License Status: REGULAR** 

Licensed/Certified/Registered 02/01/1995

Regional Office: NORTHEASTERN REGION (GREEN BAY), (920) 448-5240

#### Survey History

Survey ID: 0095770 End Date: 09/23/2005 Type: ABBREVIATED Purpose: SURVEY/COMPLAINT

**Results:** NO STATEMENT OF DEFICIENCY ISSUED

Disclaimer: This information is provided as a public service by the Wisconsin Department of Health and Family Services (DHFS). The Department neither endorses any facility nor guarantees that this information is accurate, up-to-date, or complete. This information, which should not be used as a sole source in selecting a facility, does not replace official information sources.

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**Complaint History** 

Date Complaint Received: 05/15/2006 Date Investigation Completed: 06/19/2006

Subject Area(s) Result SOD #

ABUSE NOT SUBSTANTIATED STAFF ADEQUACY NOT SUBSTANTIATED

Date Complaint Received: 01/25/2005 Date Investigation Completed: 09/23/2005

Subject Area(s) Result SOD #

SUPERVISIONNOT SUBSTANTIATEDSTAFF ADEQUACYNOT SUBSTANTIATEDPROGRAM SERVICESNOT SUBSTANTIATED

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